Application or Docket Number

Effective October 1, 2003											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			48				RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			48 minus 20=		* 23		X\$ 9=	252	OR	X\$18=	
INDEPENDENT CLAIMS			8 minus 3 =		* 5		X43=	215	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							+145=	7/3	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	825	OR	TOTAL	
CLAIMS AS AMENDED - PART II] -	OTHER	
	(Column 1) (Column 2) (Column 3)							ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		OR	+290=	
							TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui	mn 2)	(Column 3)_	ADDIT. FEE	<u> </u>	.	ADDIT. I LL	
AMENDMENT B		CLAIMS PEMAINING AFTER AMENDMENT		PREVI	HEST IBER CUSLY FOR	PRESENT EXTPA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X43=		OR	X86-	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN.	T CLAIM		-145=		OR	+290=	
							TO TAL		OR	TOTAL	
							ADDIT FEE		1 011	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colu	Mr 21 HEST	(Column 3)	/	ADDI	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSL/ FOR	PRESENT EVTRA	RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	••		-	48 9=		OR	X\$18=	
	Independent	•	Minus	***		<u> </u>	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1.35		1	+290=	
* If the entry in column 1 is less than the entry in column 2, write 17 in column 3							+145=		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter 20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter 3. The "Wighest Number Previously Paid For" (Total or Independent is the highest number found.								propriate bo	OR	ADDIT FEE	

Patient and Trademark Office U.S. DEPARTMENT OF COMMERCE